#### **2019 FOREIGN NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F97000001468

Entity Name: THOROUGHBRED RETIREMENT FOUNDATION, INC.

FILED
Oct 22, 2019
Secretary of State
2379727356CR

# **Current Principal Place of Business:**

10 LAKE AVENUE

SARATOGA SPRINGS, NY 12866

#### **Current Mailing Address:**

**POST OFFICE BOX 834** 

SARATOGA SPRINGS, NY 12866 US

FEI Number: 13-3132741 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

INCORP SERVICES, INC. 17888 67TH COURT NORTH LOXAHATCHEE, FL 33470 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JANICE NULL O.B.O. INCORP SERVICES, INC.

10/22/2019

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

City-State-Zip:

TitleDIRECTORTitleDIRECTORNameHALE, LEONARDNameHOLMES, LARRYAddress10 LAKE AVENUE<br/>2ND FLOORAddress10 LAKE AVENUE<br/>2ND FLOOR

City-State-Zip: SARATOGA SPRINGS NY 12866 City-State-Zip: SARATOGA SPRINGS NY 12866

TitlePRESIDENTTitleDIRECTORNameMACKAY, PATRICKNameO'CAIN, SUZIEAddress10 LAKE AVENUE<br/>2ND FLOORAddress10 LAKE AVENUE<br/>2ND FLOOR

SARATOGA SPRINGS NY 12866 City-State-Zip: SARATOGA SPRINGS NY 12866

TitleDIRECTORTitleDIRECTORNamePRIGGEN, LESLIENameSAYLOR, PAULAddress10 LAKE AVENUE<br/>2ND FLOORAddress10 LAKE AVENUE<br/>2ND FLOOR

City-State-Zip: SARATOGA SPRINGS NY 12866 City-State-Zip: SARATOGA SPRINGS NY 12866

Title CEO Title DIRECTOR

Name ROCHE, JOHN P. Name WOLFENDALE, MAGGIE

Address 10 LAKE AVENUE Address 10 LAKE AVENUE 2ND FLOOR
City-State-Zip: SARATOGA SPRINGS NY

City-State-Zip: SARATOGA SPRINGS NY 12866

# Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN ROCHE CEO 10/22/2019

# Officer/Director Detail Continued:

Title SECRETARY Title DIRECTOR

Name MCLAIN, SHON Name MEITTINIS, NICHOLAS

Address 10 LAKE AVENUE Address 10 LAKE AVENUE

City-State-Zip: SARATOGA SPRINGS NY 12866 City-State-Zip: SARATOGA SPRINGS NY 12866